

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1	/				
2		1	/			
3		1	/			
4		1	/			
5		1	/			
6		1	/			
7		1	/			
8		1	/			
9		1	/			
10	4	1	/			
11		1	/			
12		1	/			
13		1	/			
14	1	/				
15	1	/				
16		1	/			
17	1	/				
18		20				
19		8				
20		4				
21		20				
22		20				
23		20				
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45						
46						
47						
48						
49						
50						
TOTAL IND.	4					
TOTAL DEP.	23					
TOTAL CLAIMS	23					

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS